United Nations E/CN.9/2014/3

Economic and Social Council

Distr.: General
21 January 2014

Original: English

Commission on Population and Development
Forty-seventh session
7-11 April 2014
Item 3 of the provisional agenda*
Assessment of the status of implementation of the Programme of Action of the International Conference on Population and Development

World demographic trends

Report of the Secretary-General

Summary

The present report, which has been prepared in accordance with Economic and Social Council resolution 1996/2, provides an overview of demographic trends for the world, its major areas, development groups and selected countries, focusing on the major changes that have occurred over the past 20 years since the adoption of the Programme of Action of the International Conference on Population and Development, held in Cairo in 1994. The topics covered by the report include population size and growth, fertility, marriage and union formation, family planning, mortality, international migration, adolescents and youth, population ageing and urbanization.

The report indicates that the world's population reached 7.2 billion in 2014 and is expected to increase by more than 2 billion by 2050. Most of the future population growth will occur in the less developed regions. There is considerable diversity in the expected future trajectory of population change across various major areas and countries, driven primarily by differences in levels and trends of fertility. The populations of Africa and Asia will increase greatly in the coming decades. In contrast, because of persistent below-replacement fertility, a number of countries are expected to experience a decline in their population size. Despite the significant improvements in life expectancy achieved over the past 20 years, many countries will fail to meet the targets for life expectancy, infant and child mortality and maternal mortality included in the Programme of Action.

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More than half of the world's population now lives in urban areas. While the number of large urban agglomerations is increasing, approximately half of all urban dwellers reside in smaller cities and towns. The number of young people has grown rapidly in recent decades and is expected to remain relatively stable over the next 35 years. In contrast, the number and proportion of older persons are expected to continue rising well into the foreseeable future.

The report concludes that the current state of the world's population is one of unprecedented diversity and change, reflected in new patterns of fertility, mortality, migration, urbanization and ageing. The continuation and consequences of these population trends will present both opportunities and challenges for the formulation and implementation of the United Nations post-2015 development agenda and for the achievement of all internationally agreed development goals.

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I. Introduction

1. The present report provides a demographic perspective on how the world has changed over the past 20 years. The world has witnessed many profound social, economic and political changes since the International Conference on Population and Development, held in Cairo in 1994. Few factors will shape the future global development agenda as fundamentally as the size, structure and spatial distribution of the world's population. Ongoing demographic transitions associated with changing levels and patterns of fertility, mortality and migration continue to bring about important changes in the size, structure and spatial distribution of families, households and communities around the world, creating both opportunities and challenges for the design of policies that aim to promote the well-being of current and future generations.

2. The demographic trends presented in this report are based for the most part on the results set out in *World Population Prospects: The 2012 Revision*, the twenty-third round of the official United Nations population estimates and projections prepared biennially by the Population Division of the Department of Economic and Social Affairs of the Secretariat. The *2012 Revision* builds on the previous revision by incorporating the results of new population census data from 94 countries and findings from many specialized demographic surveys that have been carried out around the world over the past several years. These data provide new information on population size and inform estimates of the three components of population change: fertility, mortality and migration.

3. Additional data for this report come from a number of other unique databases developed and maintained by the Population Division. Data on urban, rural and city populations are based on *World Urbanization Prospects: The 2011 Revision*, while data on contraceptive prevalence and unmet need for family planning are based on survey data from 194 countries or areas and on annual model-based estimates and short-term projections of family planning indicators, all contained in *World Contraceptive Use 2012*. Estimates of the number of international migrants are based on *Trends in International Migrant Stock: The 2013 Revision*, which presents estimates of the number of migrants by origin, age and sex for each country and major area of the world.

II. Population size and growth

4. In 1994, when the international community met in Cairo at the International Conference on Population and Development, an estimated 5.7 billion people were living on the planet. At that time, nearly 84 million people were being added to the world's population annually. According to United Nations projections available at the time, the world's population was expected to grow by 87 million annually for the following 25 years. Whereas it had taken 123 years for the world's population to grow from 1 billion to 2 billion, it was projected at the time of the Cairo Conference that only 11 years would be required for the increase from 5 billion to 6 billion.

5. In 2014, the twentieth anniversary of the Conference, the world's population has already surpassed 7 billion — a number reached in 2011 — even though it took a little longer than predicted in 1994, as population growth over the past 20 years has been slightly slower than expected. Between 2010 and 2014, the world's

population grew at a rate of 1.2 per cent per annum, significantly below the 1.5 per cent per annum around the time of the Cairo Conference (see table 1 and figure I). At the beginning of 2014, the world's population was estimated at 7.2 billion, with approximately 82 million being added every year and roughly a quarter of this growth occurring in the least developed countries. On its current trajectory, the world's population is expected to reach 8.1 billion in 2025 and 9.6 billion in 2050.

6. While the absolute size of the world's population has grown substantially since the Cairo Conference, the annual increase in that population has been declining since the late 1960s. By 2050, it is expected that the world's population will be growing by 49 million people per year, more than half of whom will live in the least developed countries. Currently, of the 82 million people added to the world's population every year, 54 per cent are in Asia and 33 per cent in Africa. By 2050, however, more than 80 per cent of the global increase will take place in Africa, with only 12 per cent in Asia.

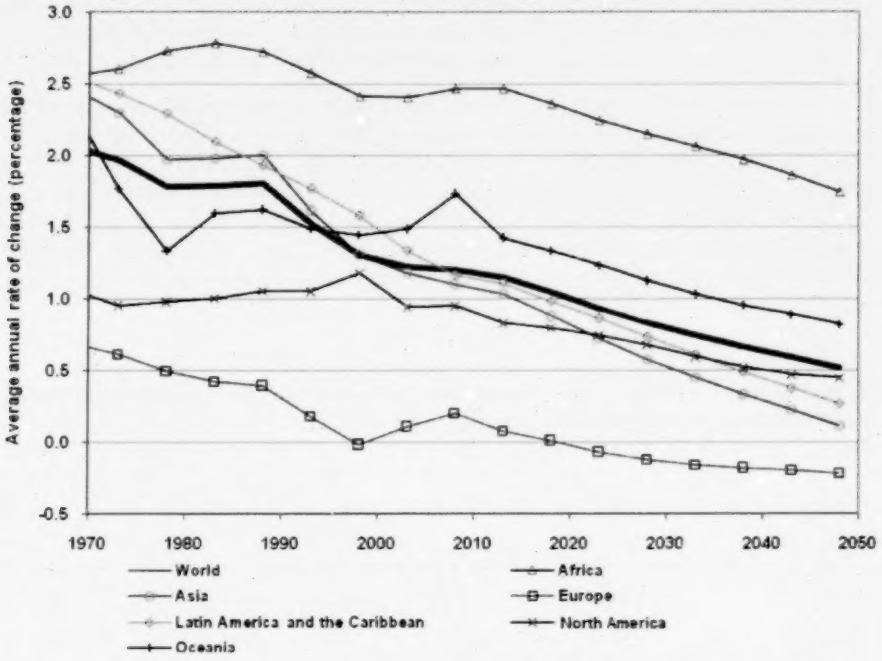
Table 1
Population, average annual increment and growth rate, for the world, development groups and major areas, selected years and periods (medium variant)

	Population (millions)			*Average annual increment (millions)*			*Average annual growth rate (percentage)*		
World, development group or major area	*1994*	*2014*	*2050*	*1990-1995*	*2010-2015*	*2045-2050*	*1990-1995*	*2010-2015*	*2045-2050*
World	5 661	7 244	9 551	84.2	81.7	48.5	1.52	1.15	0.51
More developed regions	1 169	1 256	1 303	5.0	3.7	0.1	0.43	0.30	0.01
Less developed regions	4 492	5 988	8 248	79.2	78.0	48.4	1.81	1.33	0.60
Least developed countries	569	919	1 811	15.1	20.3	26.7	2.77	2.28	1.54
Other less developed countries	3 923	5 068	6 437	64.0	57.7	21.7	1.68	1.16	0.34
Africa	699	1 138	2 393	17.3	27.0	39.9	2.57	2.46	1.74
Asia	3 432	4 342	5 164	53.9	43.9	5.7	1.61	1.03	0.11
Europe	729	743	709	1.3	0.6	-1.6	0.18	0.08	-0.22
Latin America and the Caribbean	478	623	782	8.2	6.8	2.1	1.77	1.11	0.27
North America	294	358	446	3.0	2.9	2.0	1.05	0.83	0.45
Oceania	29	39	57	0.4	0.5	0.5	1.49	1.42	0.82

7. Although most major areas experienced similar levels of population growth between 1994 and 2014, Africa and Europe stood out, with growth rates significantly higher in Africa and lower in Europe compared with other regions (see figure I). Between 2014 and 2050, all major areas are expected to experience further reductions in their population growth rates, resulting in increasingly dramatic contrasts in population dynamics among them. For example, by 2050, Africa will be growing more than 6 times as fast as Latin America and the Caribbean and more than 15 times as fast as Asia. Partly because of international migration, the growth rates of both North America and Oceania will exceed those of Asia and Latin America and the Caribbean over the coming decades. Europe is projected to experience population decline after 2020. Overall, the global population growth rate is projected to fall to 0.5 per cent per annum by 2050.

Figure I

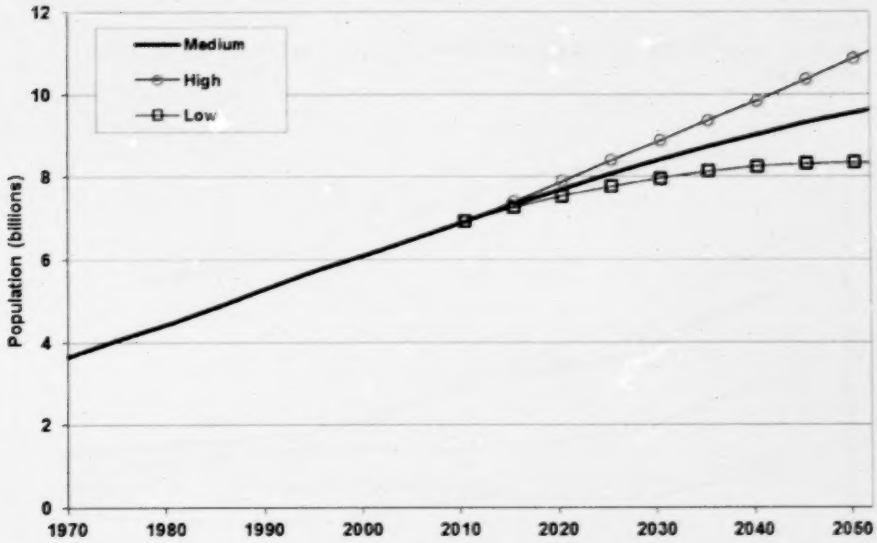
Average annual rate of population change, for the world and major areas, 1970-2050



8. Small variations in the trajectory of future fertility will have major consequences for the future size and structure of the world's population (see figure II). In the high-fertility variant of the projections, an extra half child per woman, on average, implies that there would be 1.3 billion more people in the world in 2050 than under the medium-fertility variant. On the other hand, if women have, on average, a half child less, as implied by the low-fertility variant, there would be 1.2 billion fewer people in the world in 2050.

Figure II

Estimates and projections of total world population, 1970-2050 (medium-, high- and low-fertility variants for 2015 and later)



9. Most of the population growth projected to occur between 2014 and 2050 will be concentrated in a small number of countries. During the period 2014-2050, nine countries are expected to account for more than half of the world's projected increase: the Democratic Republic of the Congo, Ethiopia, India, Indonesia, Nigeria, Pakistan, the United Republic of Tanzania, the United States of America and Uganda. Several of these countries are among the most populous today. Given its anticipated growth, India is projected to overtake China and become the world's most populous country by 2028. High population growth rates prevail in many of the countries that are on the United Nations list of 49 least developed countries. Between 2014 and 2050, the total population of these countries is projected to double, according to the medium-fertility variant, putting additional pressure on resources and the environment and straining government capacities to provide high-quality services.

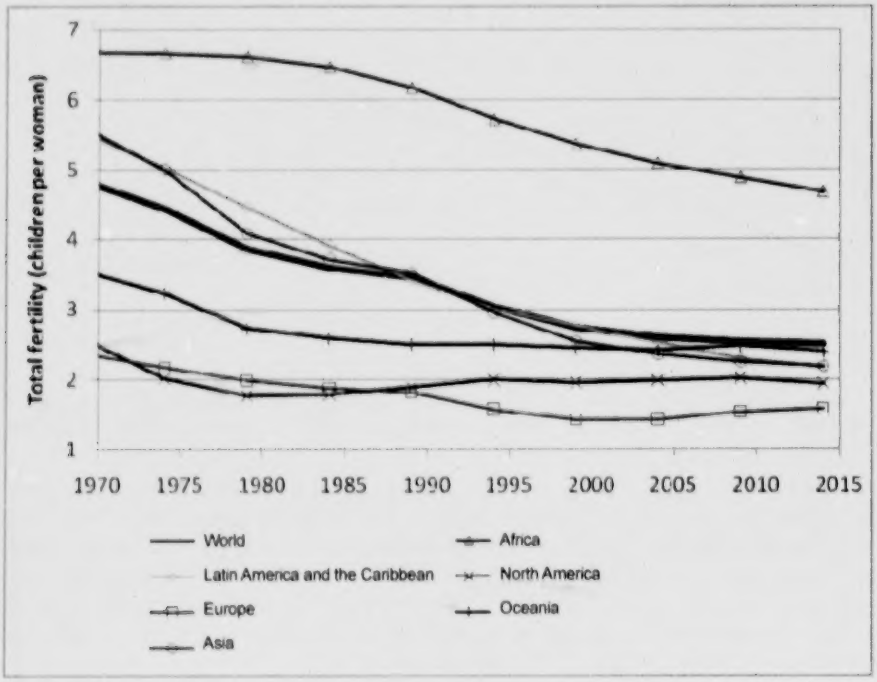
10. At the other end of the spectrum, the populations of more than 40 countries and major areas are expected to decrease between 2014 and 2050. The largest absolute declines are expected for China, Germany, Japan, Poland, Romania, the Russian Federation, Serbia, Thailand and Ukraine. Many other countries, particularly in Eastern Europe, but also in East, South-East and Western Asia, other parts of Europe and Latin America and the Caribbean, are also expected to experience population decline before 2050. Population decline and the acceleration of population ageing are therefore important concerns in a growing number of countries and major areas.

III. Fertility, marriage and union formation and family planning

11. In 1994, when the international community met in Cairo, total fertility for the world had already fallen to around 3 children per woman, down from around

4.5 children per woman in the early 1970s. The decline had been particularly sharp in Asia and Latin America and the Caribbean, whereas fertility decline had just begun in Africa (see figure III).

Figure III
Levels of total fertility (births per woman), for the world and major areas, 1970-2015

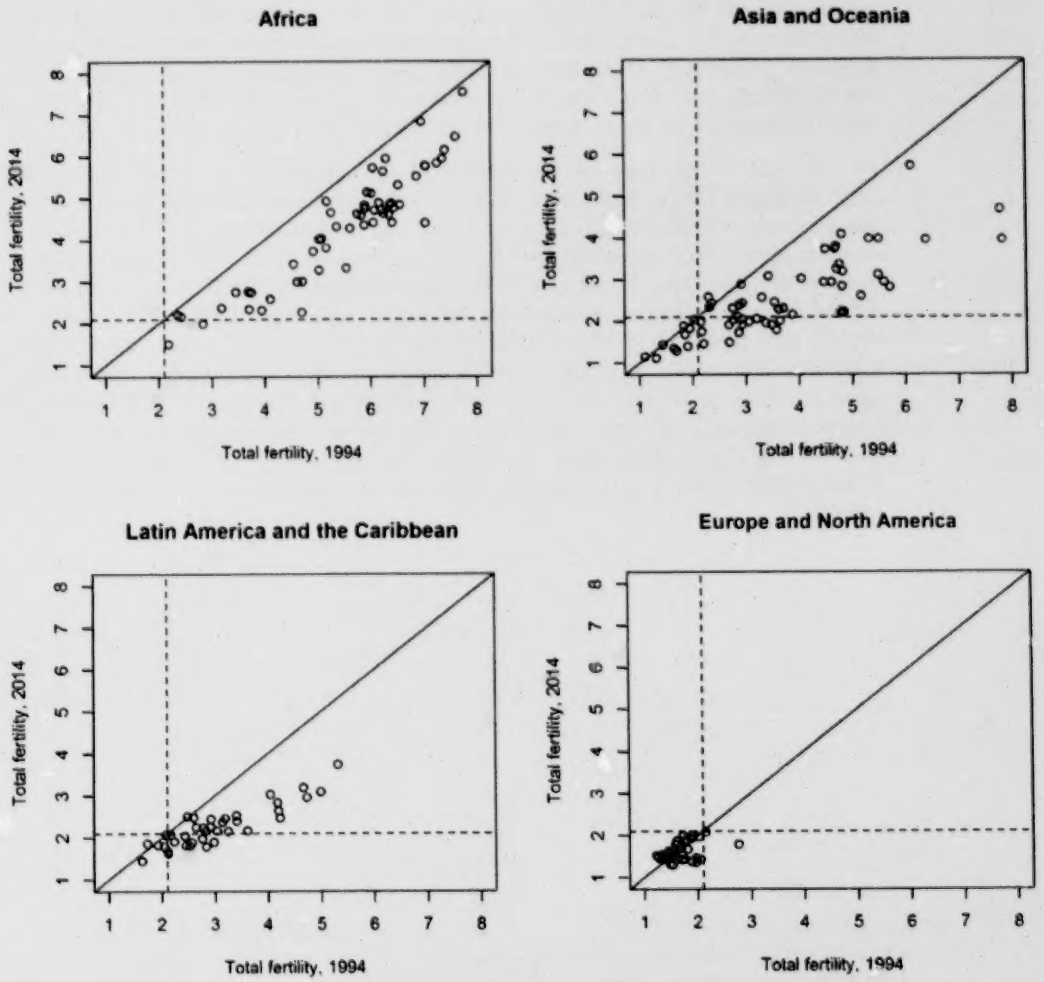


12. In 2014, total fertility for the world is around 2.5 children per woman. After the 1994 Cairo Conference, fertility fell in most major areas of the world, with the notable exception of Europe, where fertility levels rebounded slightly in a number of countries. Although fertility has fallen in Africa, the decline began from a higher initial level, and the pace of decline has been slower than in other major areas. Therefore, by 2014, the level of fertility in Africa was considerably higher than that in other regions.

13. Considerable variation in fertility levels has been observed among countries within the same major area over the past 20 years. In Africa, the scattering of points below the diagonal line in figure IV illustrates that total fertility has fallen significantly in some countries over the past 20 years (those located farthest from the diagonal line, such as Djibouti, Ethiopia and Rwanda), while in other countries fertility has remained virtually unchanged (those located close to the diagonal line, such as the Congo, Mali, Niger and Nigeria). At the other end of the spectrum, in 1994, the fertility rates of virtually all countries in Europe and North America were already below replacement level, indicated in figure IV by the dashed vertical line. Many countries in Europe have recorded a slight increase in fertility over the past 5 to 10 years, although it has not been sufficient, in most cases, to reach replacement

level. Consequently, these countries appear below the dashed horizontal line, but above the diagonal line, in figure IV. Western European countries, such as Austria and Germany, and virtually all countries of Eastern and Southern Europe still had fertility levels below 1.5 children per woman in 2014. The long-term demographic implications of these persistent low levels of fertility vary, as some countries in Europe are receiving working-age migrants, partly offsetting the deficit of births, while other countries, mainly in Eastern Europe, face low fertility combined with the out-migration of young people, leading to population decline. Over this period, fertility in countries of Asia, Oceania and Latin America and the Caribbean has continued to decline towards or below replacement level.

Figure IV
Levels of total fertility (births per woman), by country or area, 1994 compared with 2014



14. The age of first marriage or union formation is usually a key determinant of when a woman begins to bear children. Since the Cairo Conference, a postponement in marriage and union formation has contributed to an increasing age at first birth. The sharpest increase in age at marriage has been observed in Europe, where in some countries, such as Norway and the United Kingdom of Great Britain and Northern Ireland, the female age at marriage has increased by more than 2.5 years per decade. Marriage among young men and women in North America, Europe, Australia and New Zealand has been replaced to a certain extent by cohabiting unions. In North Africa and East Asia, the postponement of marriage to later ages has not been accompanied by increases in cohabiting unions. At the same time, the proportion of ever married women and men has declined across all major areas of the world.

15. Changing patterns of marriage and union formation have weakened the link between marriage and childbearing. Extramarital births as a proportion of all births have risen over the past 20 years in many low- and intermediate-fertility countries. More than half of all births now occur outside marriage in Australia and seven countries of Europe, which have joined a group of countries in Latin America and the Caribbean with traditionally high rates of extramarital birth. By contrast, in many countries in Asia and North Africa, extramarital births are rare.[1]

16. Policies to increase the availability of safe and effective contraceptives and accessibility to family planning programmes and reproductive health care have been instrumental in facilitating reductions in fertility. In 2013, more than 90 per cent of Governments provided either direct or indirect support for family planning programmes; in 1996, 86 per cent of Governments did so.[2] In all major areas except Africa, contraceptive prevalence is 60 per cent or higher among married or in-union women (see figure V). Where contraceptive prevalence is low, unsafe abortion rates tend to be high. In 2008, an estimated 28 unsafe abortions occurred per 1,000 women aged 15 to 44 in Africa, compared with a worldwide average of 14.[3] The unsafe abortion rate in 2008 was highest (28 or higher) in East, Central and West Africa and in Central and South America. Unsafe abortion indicates the need not only for effective means to prevent pregnancy but also for improved access to safe abortion services.

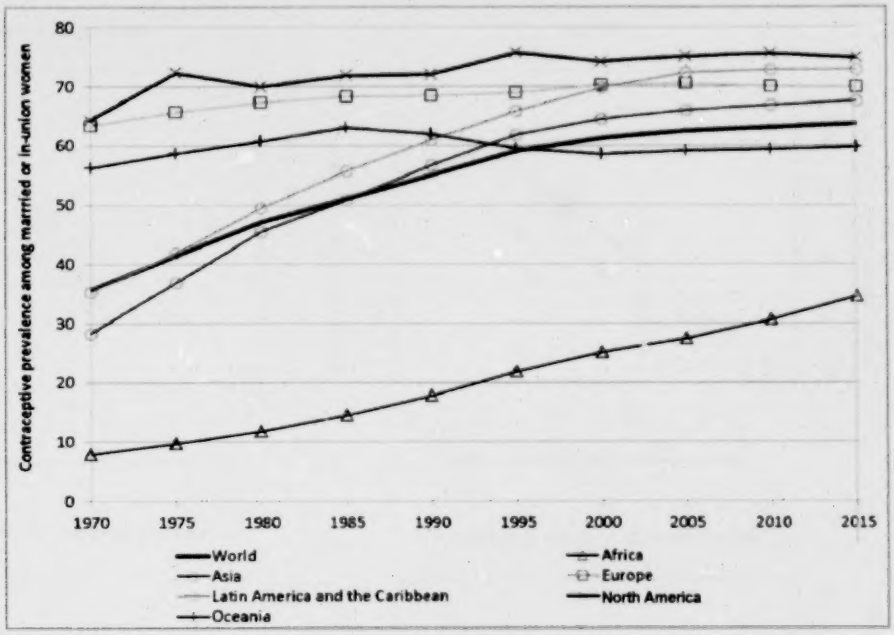
[1] *World Fertility Report 2012* (United Nations, 2013).

[2] *World Population Policies 2013* (United Nations, 2013).

[3] Gilda Sedgh and others, "Induced abortion: incidence and trends worldwide from 1995 to 2008," in *The Lancet*, vol. 379, No. 9816 (18 February 2012), pp. 625-632.

Figure V

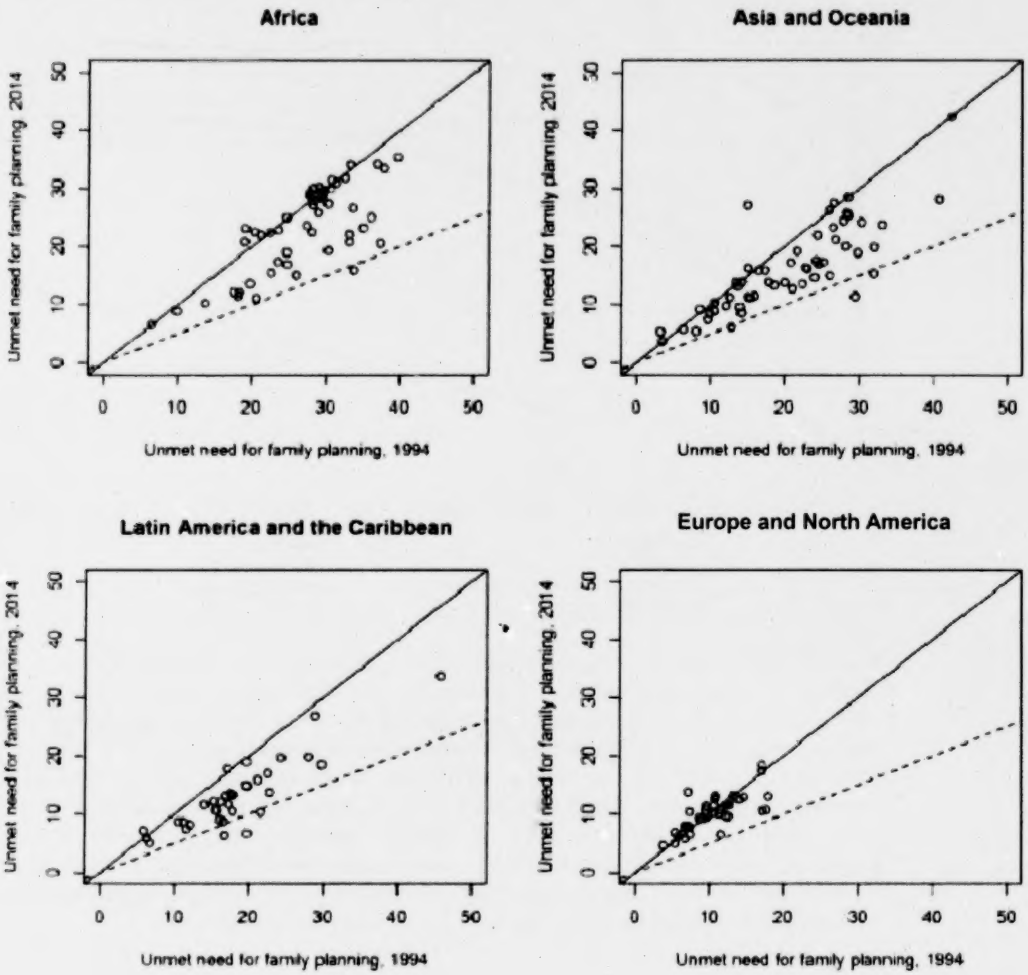
Levels of contraceptive prevalence (percentage) among married or in-union women, for the world and major areas, 1970-2015



17. In 1999, the key actions for the further implementation of the Programme of Action of the International Conference on Population and Development (A/S-21/5/Add.1) set benchmarks for reducing the gap between contraceptive use and the proportion of individuals expressing a desire to space or limit their families. This gap is known as the "unmet need" for family planning. Using 1994 as a baseline, only Bhutan, Cambodia, Nicaragua, Paraguay, Peru, Swaziland and Viet Nam are likely to achieve, by 2014, the minimal agreed benchmark of a 50 per cent reduction in unmet need (see figure VI, points below the dashed line). The provision of voluntary and high-quality family planning information, counselling and services merits further investment and is relevant for all countries of the world.

Figure VI

Percentage of unmet need for family planning among married or in-union women, by country or major area, 1994 versus 2014

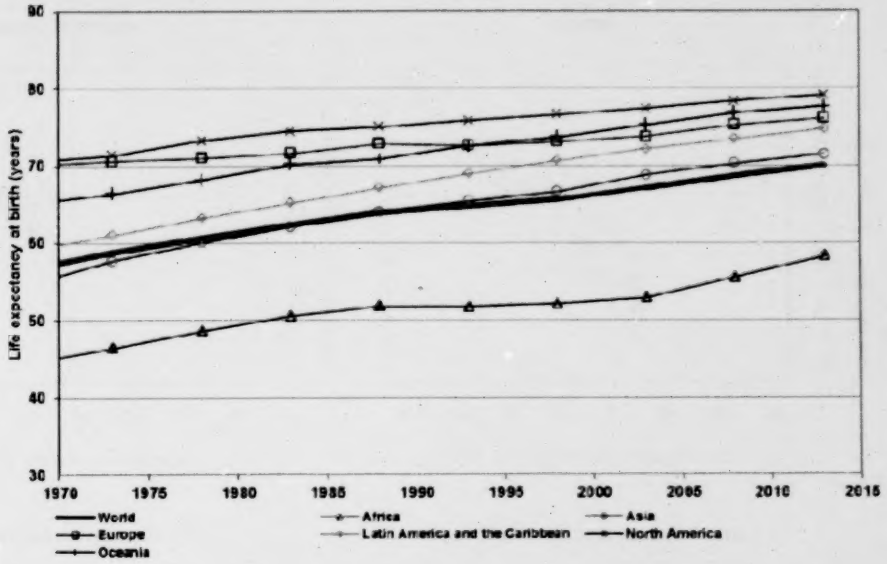


IV. Mortality, including HIV/AIDS

18. In the 20 years since the Cairo Conference, life expectancy has increased worldwide, furthering gains achieved in earlier decades. Life expectancy at birth for the world as a whole rose from 64.8 years in the period 1990-1995 to 70.0 years in the period 2010-2015, a gain of 5.2 years (see figure VII). The gains achieved by the world's major areas ranged from 3.3 years in North America to 6.5 years in Africa. Particularly noteworthy is the fact that the least developed countries made substantial progress, gaining 8.9 years of life expectancy over the same period.[4]

[4] *World Mortality Report 2013* (United Nations, 2013).

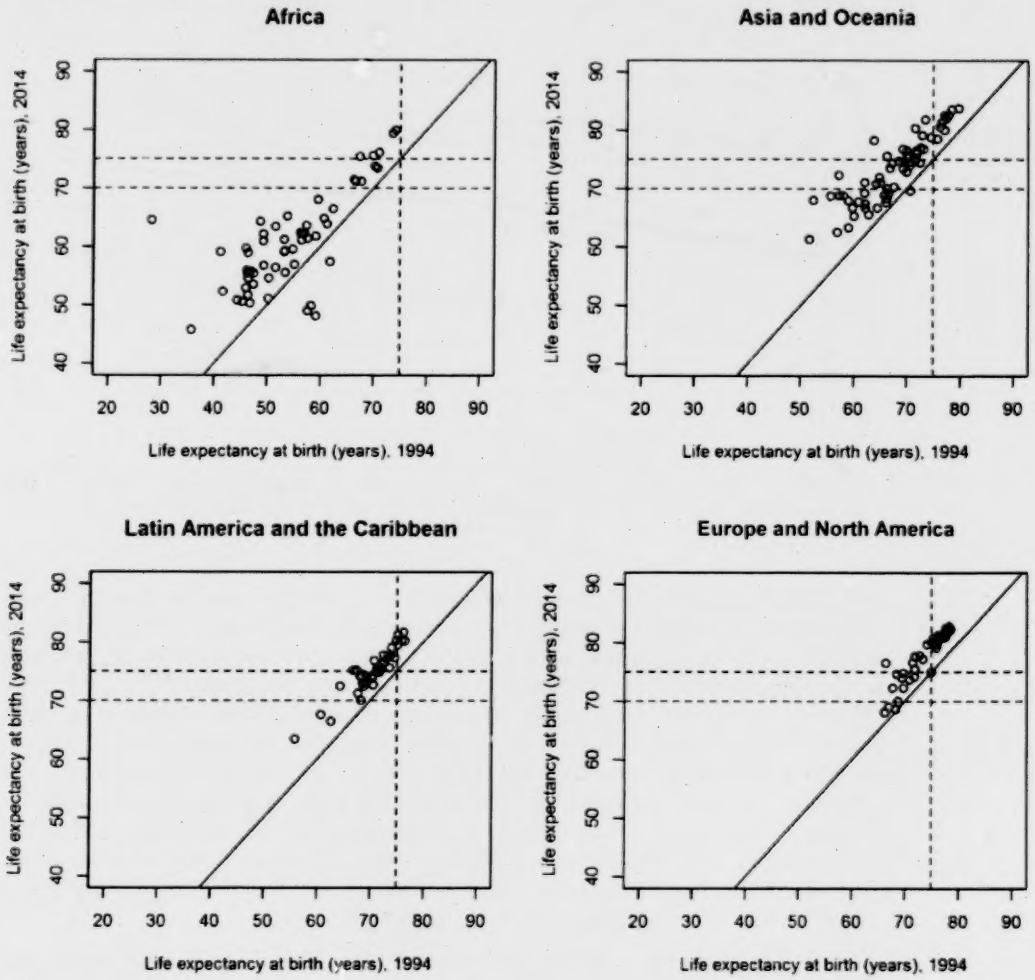
Figure VII
Life expectancy at birth (in years), for the world and major areas, 1970-2015



19. Despite significant improvements in life expectancy over the past 20 years, most countries will fail to achieve a life expectancy of 75 years (70 years for the countries with the highest mortality levels) by the target date of 2015, as proposed in the Programme of Action (see figure VIII). During the period 2010-2015, only 76 out of 201 countries or major areas have achieved a life expectancy at birth greater than 75 years, and in 33 of these countries, average survival already exceeded 75 years in the period 1990-1995. Only 35 per cent of countries with a life expectancy of between 60 and 75 years at the time of the Conference have surpassed 75 years in the period 2010-2015, and just 1 of the 53 countries with a life expectancy of less than 60 years at the time of the Conference has since surpassed 70 years. Thus, overall progress in life expectancy has fallen short of the goals to which the Conference delegates aspired 20 years ago.

20. The Programme of Action also sought to reduce disparities in health and survival both between and within countries and regions by accelerating mortality reduction in those populations lagging furthest behind. Although the gap in life expectancy at birth between the countries in the more developed regions and the least developed countries remains large, at 17.1 years, it is nonetheless 5 years smaller than in the early 1990s. Sex differences in longevity persist as well. Worldwide, women live 4.5 years longer than men, on average, and this gap has remained essentially unchanged since 1994. Across the world's major areas, the difference between female and male longevity in the period 2010-2015 ranged from a low of 2.7 years in Africa to a high of 7.8 years in Europe.

Figure VIII
Levels of life expectancy at birth (in years), by country or major area, 1994 compared with 2014

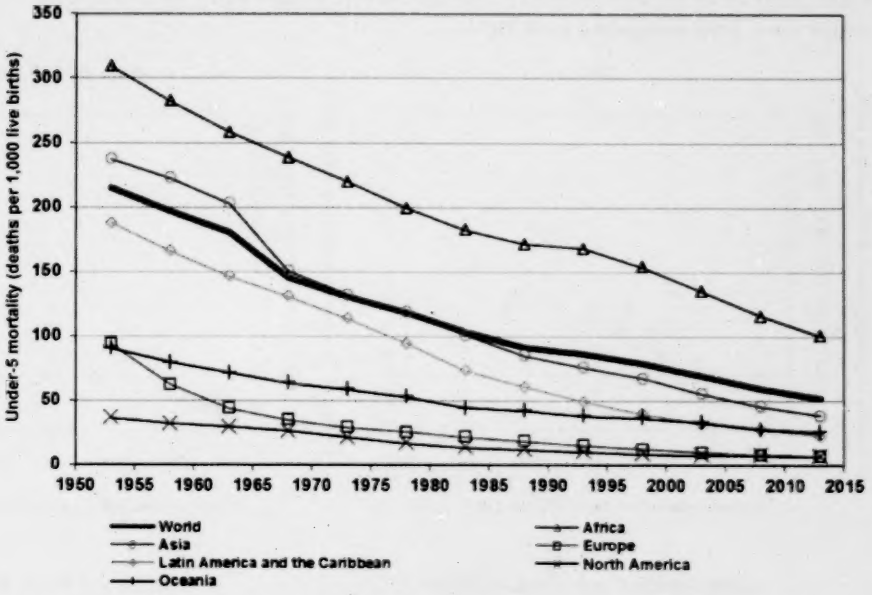


21. Recent decades have witnessed considerable progress in reducing child mortality. Worldwide, under-5 mortality is estimated to have fallen by 40 per cent between 1994 and 2014, from 86 to 52 deaths per 1,000 live births (see figure IX). Among the world's major areas, the largest absolute change in under-5 mortality over this period occurred in Africa, with a decline from 168 to 101 deaths per 1,000 live births. Nevertheless, Africa had by far the highest level of under-5 mortality of any major area in 2014. With the exception of most countries in North Africa and a number of small islands located just off the mainland, the levels of under-5 mortality of most African countries are still well above the target established in 1994 by the Programme of Action of 45 deaths per 1,000 live births (see figure X). The major area with the next-highest level of under-5 mortality in 2014 was Asia, at 39 deaths per 1,000 live births. Approximately one quarter of the countries in Asia

are expected to be unable to achieve the under-5 mortality target established in Cairo. In North America and Europe, under-5 mortality stood at 7 deaths per 1,000 live births in 2014, meaning that a child born in Africa was 14 times more likely to die before age 5 than in those two regions.

Figure IX

Probability of dying before age 5 (or under-5 mortality rate), for the world and major areas, 1970-2015



22. Recent declines in child mortality reflect primarily improved survival between the ages of 1 and 4. Reducing mortality among infants, especially newborns, has proved a greater challenge. Consequently, the share of neonatal deaths (first month of life) among all under-five deaths grew from 37 per cent in 1990 to 44 per cent in 2012.[5] Neonatal causes of death — such as preterm birth, intrapartum complications and neonatal infections — must be addressed in order to achieve further reductions in child mortality. This will require investing in health system infrastructure, as well as ensuring women's access to nutrition and high-quality antenatal and delivery care. In countries experiencing high levels of under-five mortality rates, current trends towards lower fertility, increased urbanization and rising levels of education among women and girls are likely to contribute to continued reductions in the probability of dying in the first five years of life.

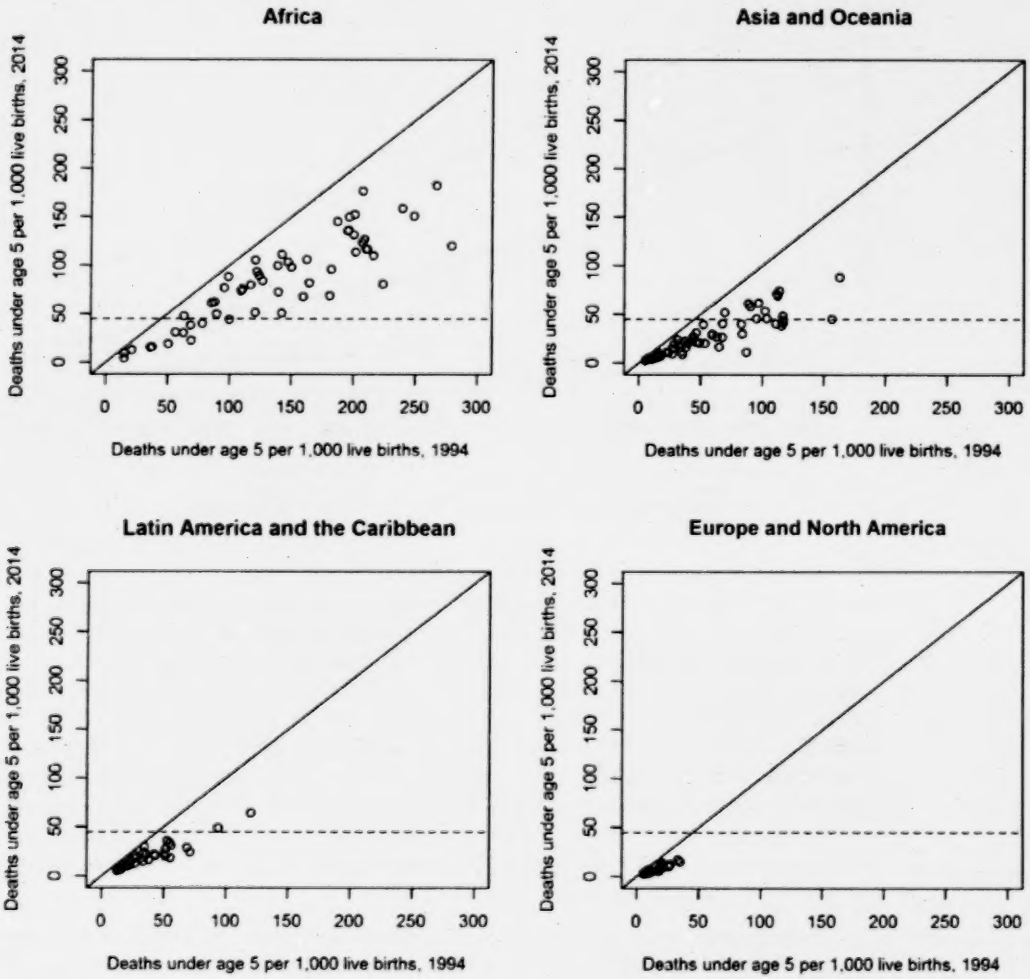
23. Adolescence and youth are often considered the healthiest stages of life, but they are also critical periods during which young people are faced with a unique set of threats to their health and survival. Young people tend to be particularly vulnerable to sexually transmitted infections, mental health disorders, and injuries such as those related to traffic accidents or violence. In addition, adolescents and youth are confronted with decisions that can have important implications for their

[5] *Levels and Trends in Child Mortality: Report 2013* (United Nations Children's Fund, 2013).

future risks of morbidity and mortality. Many of the important risk behaviours that lead to conditions such as HIV/AIDS or non-communicable diseases later in life, such as unprotected sexual activity, tobacco use, poor nutrition, physical inactivity and excessive consumption of alcohol, tend to become established in adolescence and young adulthood. Gender differentials and cultural factors play important roles in shaping these risks.

Figure X

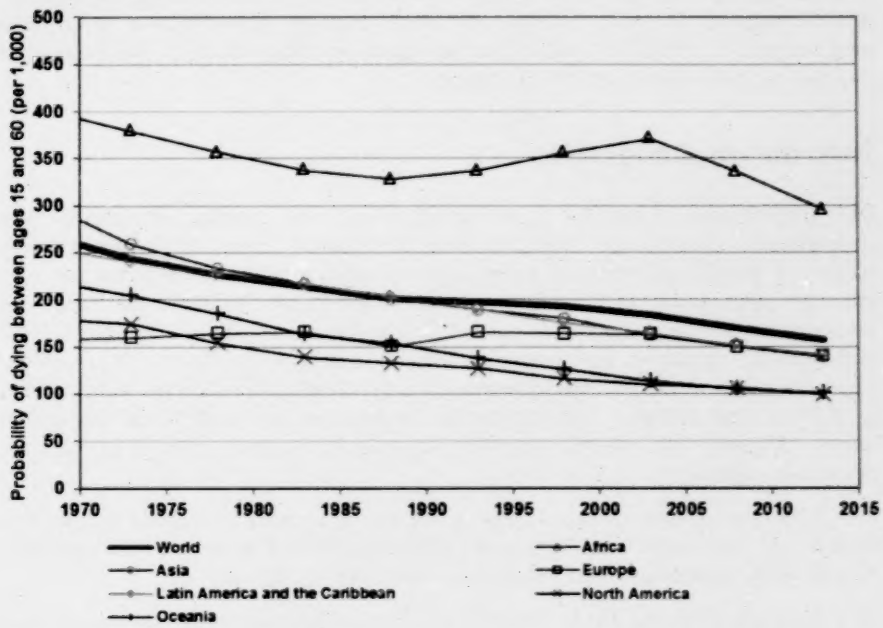
Probability of dying before age 5 (or under-five mortality rate), by country or major area, 1994 compared with 2014



24. The probability of dying between the ages of 15 and 60 is a widely used summary indicator of adult mortality, representing the risks of dying during the working and reproductive ages. Worldwide, 157 of every 1,000 15-year-olds would die before age 60 if subject to the age-specific mortality rates prevailing in the period 2010-2015. The probability of dying between ages 15 and 60 was lowest in

North America, at 99 per 1,000, and highest in Africa, at 296 per 1,000 (see figure XI). In the 20 years since the Conference, progress in reducing mortality in the working and reproductive ages has been much slower than in reducing child mortality. Major challenges to improving survival in this age group include HIV/AIDS, maternal mortality and premature mortality from non-communicable diseases.

Figure XI
Probability of dying between ages 15 and 60, for the world and major areas, 1970-2015



25. Although millions of people continue to become infected with HIV each year, there are clear signs of progress against the disease at the global scale. In 2012, an estimated 2 million people were newly infected with HIV (down 37 per cent from the peak incidence in 1996) while 1.6 million people died of AIDS-related causes (down 30 per cent from the peak annual number of deaths in 2006). Success in further reducing AIDS-related mortality will hinge on progress towards universal access to treatment. In 2012, only 9.7 million people living in low- and middle-income countries were receiving treatment, out of an estimated 28.3 million in need of treatment in those countries.

26. Although substantial progress has been made, the world will not achieve the Conference and Millennium Development Goal target of a 75 per cent reduction in the maternal mortality ratio by 2015. The global maternal mortality ratio fell from 400 deaths per 100,000 live births in 1990 to 210 deaths per 100,000 live births in 2010, cutting the number of maternal deaths that occur each year nearly in half, from 543,000 in 1990 to 287,000 in 2010. More than half of all maternal deaths now occur in sub-Saharan Africa, where the maternal mortality ratio was 500 deaths per 100,000 live births in 2010.

27. Common non-communicable diseases, such as cardiovascular ailments, cancers, diabetes and respiratory diseases, are responsible for substantial burdens of morbidity and mortality in both more and less developed regions. Risk factors, such as smoking, and unhealthful diets and physical inactivity that contribute to overweight and obesity, have slowed gains in life expectancy in Europe, North America and parts of Latin America and the Caribbean, and are beginning to affect other regions as well. In addition, the costs associated with detecting, treating and managing the symptoms of non-communicable diseases are high and pose a particular challenge to health systems that continue to struggle with large burdens of communicable diseases at the same time. Improving the capacity of health systems to anticipate and respond to double or triple burdens of disease (communicable and non-communicable) and injuries including through cost-effective prevention programmes, is critical to ensure that past gains in life expectancy are maintained and that progress continues into the future.

V. International migration

28. International migration has increased in size, scope, complexity and demographic significance over the past 20 years.[6] Since 1990, international migratory flows have become increasingly diverse, and many countries are now simultaneously countries of origin, destination and transit. In 2013, the number of international migrants worldwide reached 232 million, up from 154 million in 1990. Although this represents an increase of 78 million people, the share of international migrants in the world population increased only slightly, from 2.9 per cent in 1990 to 3.2 per cent in 2013. Net international migration (the number of immigrants minus emigrants) has become a primary source of population growth in the more developed regions.

29. The share of international migrants who reside in more developed regions rose from 53 per cent in 1990 to 59 per cent in 2013. In 2013, Europe and Asia combined hosted nearly two thirds of all international migrants worldwide.

30. Between 1990 and 2013, countries in the more developed regions gained more than twice as many international migrants as the less developed regions (53 million compared with 24 million). North America recorded the largest gain in the number of international migrants in that time period, with a net increase of 1.1 million migrants per year, followed by Europe, with an annual increment of 1 million and Asia with slightly less than 1 million. Between 2000 and 2013, however, Asia added more international migrants than any other major area, with a net gain of around 21 million migrants, or 1.6 million additional migrants, on average, per annum.

[6] *International Migration Report 2013* (United Nations, 2013).

Table 2
Estimated number of international migrants, increment over time, global distribution and proportion female, for the world, development groups and major areas, 1990, 2000 and 2013

	International migrants (millions)			*Increment (millions)*	*Global distribution (percentage)*			*Proportion female (percentage)*		
World, development group or major area	*1990*	*2000*	*2013*	*1990-2013*	*1990*	*2000*	*2013*	*1990*	*2000*	*2013*
World	154	175	232	77	100	100	100	49	49	48
More developed regions	82	103	136	53	53	59	59	51	51	52
Less developed regions	72	71	96	24	47	41	41	46	46	43
Least developed countries	11	10	11	0	7	6	5	47	48	45
Africa	16	16	19	3	10	9	8	47	47	46
Asia	50	50	71	21	32	29	31	46	45	42
Europe	49	56	72	23	32	32	31	51	52	52
Latin America and the Caribbean	7	7	9	1	5	4	4	50	50	52
North America	28	40	53	25	18	23	23	51	51	51
Oceania	5	5	8	3	3	3	3	49	50	50

31. In 2013, women constituted 48 per cent of the stock of international migrants. Yet there are considerable regional differences, with women accounting for 52 per cent of migrants in the more developed regions, compared with 43 per cent in the less developed regions. Since 1990, the less developed regions have witnessed a drop in the proportion of women among all migrants. This decline is primarily the result of an increase in the number of male migrants in Asia, where the share of men increased from 59 per cent in 1990 to 66 per cent in 2013, fuelled by the demand for migrant workers in oil-producing countries of Western Asia. In contrast, more traditional migrant destinations, such as Europe, Latin America and the Caribbean and North America, tend to host higher proportions of women, owing in part to the ageing-in-place of migrants, family reunification programmes and the presence of domestic workers from Asia and Africa.

32. Most international migrants are of working age — between the ages of 20 and 64 — representing 74 per cent of the global migrant stock (or 171 million people). Europe (55 million), Asia (51 million) and North America (42 million) hosted the largest number of the working-age foreign-born. Africa hosted the highest proportion of young people — below age 20 — among all international migrants (30 per cent), followed by Latin America and the Caribbean (24 per cent) and Asia (20 per cent). Sixty-five per cent of all migrants aged 65 or older were residing in Europe or North America (17 million); the ageing-in-place of migrants explains part of this phenomenon.

33. Migration between countries of the less developed regions (82.3 million in 2013) was as common as migration from the less developed to the more developed regions (81.9 million in 2013). From 1990 to 2013, the number of international migrants born in the less developed regions and residing in the more developed regions doubled, increasing from 40 million to 82 million. Over the same period, the

migrant population both originating and living in countries of the less developed regions grew from 59 million to 82 million, representing a 41 per cent increase.

34. Foreign-born residents of Africa, Asia, Latin America and the Caribbean and Europe were generally born within the major area of their current residence. In 2013, 82 per cent of international migrants living in Africa, 76 per cent in Asia, 64 per cent in Latin America and the Caribbean and 52 per cent in Europe were living in the major area of their birth. In North America, only 2 per cent of current foreign-born residents were born in a country of that region, and only about 14 per cent of foreign-born residents of Oceania were born in Oceania (see figure XII).

Figure XII

Share of international migrants from the same major area, 2013

(percentage)

Note: The boundaries do not imply official endorsement or acceptance by the United Nations. The data refer to the proportion of foreign-born people living in a particular country who were born within the major area where they are currently residing.

35. In the less developed regions, South and Western Asia hosted large numbers of migrants from neighbouring countries. For example, it is estimated that in 2013 some 2.3 million Afghans were living in Pakistan and another 2.3 million were residing in the Islamic Republic of Iran; most international migrants from Afghanistan were refugees. The majority of foreign-born people residing in oil-producing countries in Western Asia hailed from Southern Asia, with 2.9 million international migrants from India residing in the United Arab Emirates and 1.8 million in Saudi Arabia.

36. The world's largest migration corridor is between the United States and Mexico, with some 13 million international migrants from Mexico residing in the United States. In 2013, the United States hosted 2.2 million foreign-born migrants from China, 2.1 million from India and 2.0 million from the Philippines. Since 2000, the number of migrants born in China or India and living in the United States has doubled, whereas the increase in the number of Mexican migrants living in the United States was only about 31 per cent.

VI. Adolescents and youth

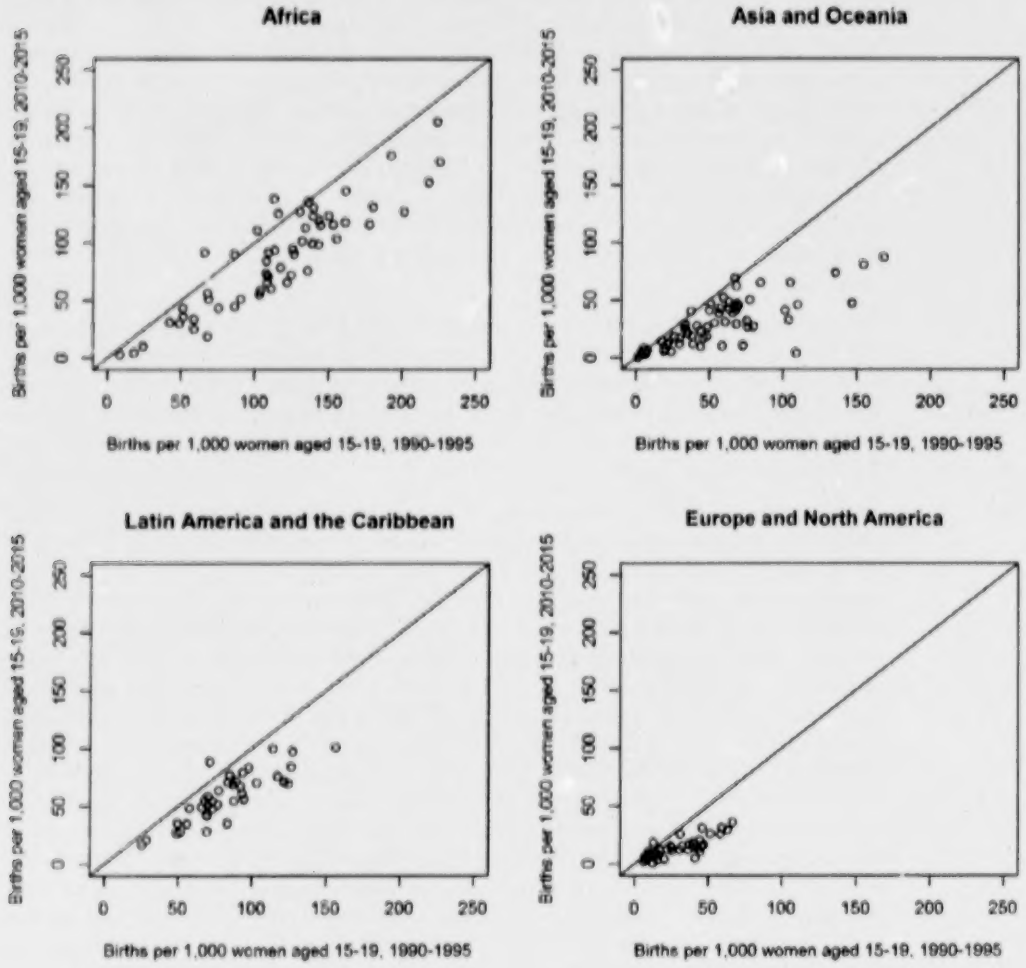
37. The number of young people (aged 15 to 24 years) has grown rapidly in recent decades. Currently, the 1.2 billion people in this age group represent around a sixth of the world's total population. The population aged 15 to 24 is still increasing rapidly in Africa, whereas it is declining, or is projected to decline, in all other major areas. Although global fertility levels are expected to continue to decline, the youthful age structure of the less developed regions ensures that there will be record numbers of young people until 2035. Provided that fertility and mortality levels in the less developed regions continue to decline, the overall number of adolescents and youth will remain relatively stable over the next 35 years. However, the proportion of the world's adolescents and youth living in Africa is expected to rise from 18 per cent in 2014 to 30 per cent in 2050, while the shares in all other major areas will decline.

38. Compared with adolescents at the time of the Cairo Conference, adolescents in 2014 are healthier and more likely to attend school, postpone entry into the labour force and delay marriage and childbearing. Because change is not occurring at the same pace everywhere, however, there are growing disparities among adolescents and youth, both within and across countries, regarding the timing and sequencing of the transition to adulthood.

39. Adolescent fertility has declined almost universally since 1994. Graphs plotting changes in the adolescent birth rate between the periods 1990-1995 and 2010-2015 reveal distinct patterns for the four major areas (see figure XIII). Africa is the most heterogeneous area with respect to levels of adolescent childbearing, but in many countries the adolescent birth rate in the period 1990-1995 was well above 100 births per year per 1,000 women aged 15 to 19. Adolescent childbearing in Africa has fallen since then (shown as points below the diagonal line), but the level remains high in many countries. By contrast, the adolescent birth rate in virtually all countries in Asia and Oceania was below 100 births per year per 1,000 women in the period 1990-1995. Nevertheless, the adolescent birth rate has fallen by 50 per cent or more in many countries. In the majority of countries in Latin America and the Caribbean, despite a substantial decline in total fertility, adolescent childbearing declined, but levels remain relatively high (between 50 and 100 births per year per 1,000 women aged 15 to 19). Declines in adolescent childbearing have been associated with increased school enrolment and a later age at marriage, among other factors. Future prospects for continued decline rest on investments in girls' education and expanded access to sexual and reproductive health information, education and services.

Figure XIII

Levels of the adolescent birth rate (births per 1,000 women per year), by country or major area, 1990-1995 compared with 2010-2015

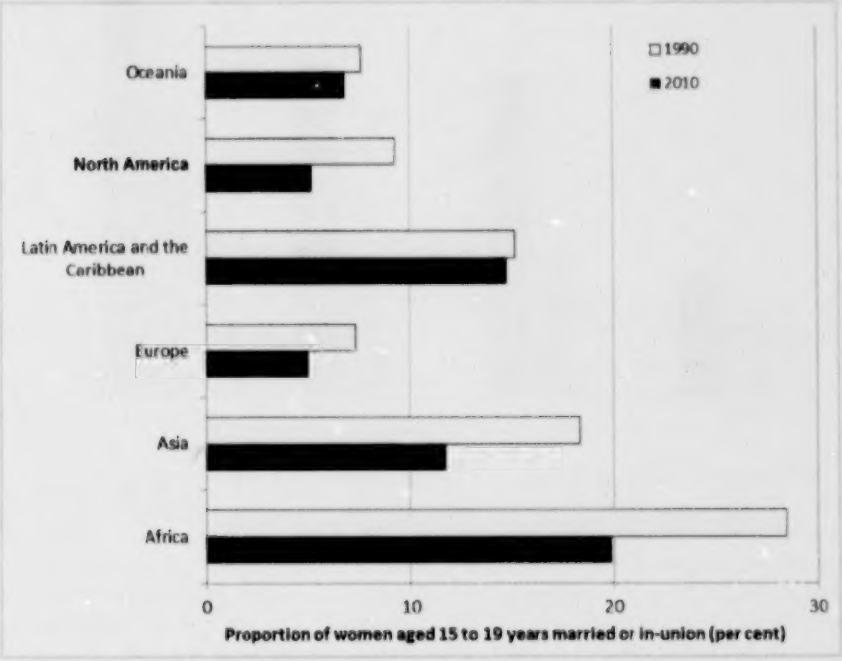


40. A young age at the start of childbearing is often a reflection of a young age at marriage and union formation. Marriage at a young age remains common in Africa, with one in five women aged 15 to 19 years married or in a union (see figure XIV).[7] Since 1990, all major areas have experienced declines in the proportion of adolescents who are married or in a union, with the exception of Latin America and the Caribbean, where the prevalence of early marriage and union formation has remained virtually unchanged over the past two decades. Governmental efforts to eliminate child marriage (typically defined as marriage before age 18) and to increase girls' educational attainment will help make childbearing and union

[7] "National, regional and global estimates and projections of the number of women aged 15 to 49 who are married or in a union, 1970-2030" (United Nations, technical paper No. 2013/2).

formation even less common in adolescence, contributing to progress in health and gender equality and women's empowerment.

Figure XIV
Percentage of women aged 15 to 19 years who are married or in a union, for major areas, 1990 and 2010

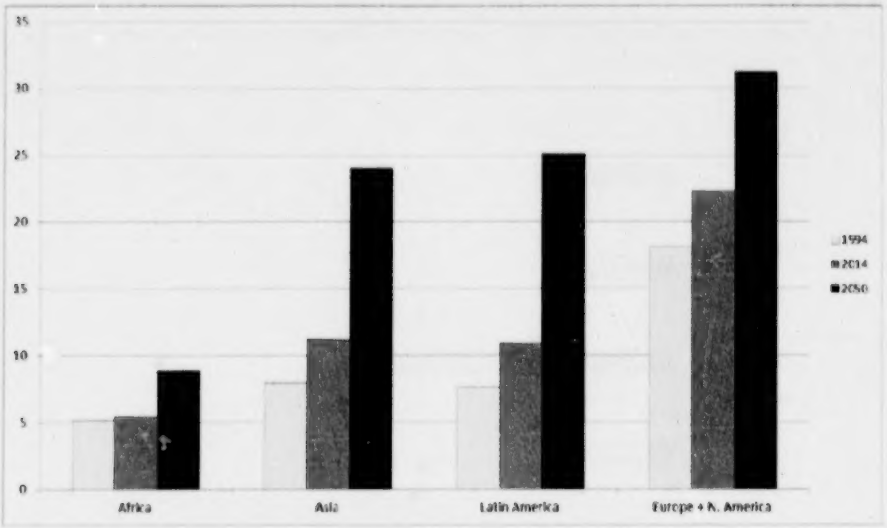


VII. Population ageing

41. Population ageing — the phenomenon by which older people become a proportionally larger share of the total population — is inevitable when people live longer and choose to have fewer children. Not surprisingly, therefore, patterns of declining fertility and mortality over the past two decades have led to significant shifts in the age structure of the world's population. Although most advanced in Europe and North America, population ageing is occurring, or will soon begin, in all the major areas of the world (see figure XV). Globally, the share of older people (aged 60 years or older) increased from 9 per cent in 1994 to 12 per cent in 2014, and is expected to reach 21 per cent by 2050.[8]

[8] *World Population Ageing 2013* (United Nations, 2013).

Figure XV
Percentage of population aged 60 years or older, for major areas, 1994, 2014 and 2050



42. While rising life expectancy is a success story, population ageing presents a number of challenges to families, communities and societies with respect to issues such as economic growth, economic security in old age, the organization of health care systems and the strength of familial support systems. Old-age support ratios, defined as the number of working-age adults per older person in the population, are already low in most countries of the more developed regions and are expected to continue to fall in the coming decades, ensuring continued fiscal pressure on support systems for older people. In settings with limited social security systems, older people are at much greater risk for poverty.

43. Older people are the world's fastest-growing age group. In 2014, the annual growth rate for the population aged 60 years or older will be almost triple the growth rate for the population as a whole. In absolute terms, the number of people aged 60 years or older has almost doubled between 1994 and 2014, and people in this age group now outnumber children under the age of 5.

44. From 1994 to 2014, Asia added the largest number of older people (225 million), accounting for almost two thirds (64 per cent) of global growth. While the growth in the number of older people was fastest in Latin America and the Caribbean and second fastest in Africa, the contribution of these regions to the global growth in the population of older people (33 million and 29 million older people, respectively) was relatively small and together accounted for only 17 per cent. The growth of the older population was slowest in Europe, yet it added more older people to its population (38 million, or 11 per cent of the global increase) than any other major area except Asia.

45. Countries in the more developed regions have older population age structures than most countries in the less developed regions. However, in absolute numbers, a majority of older people worldwide live in the less developed regions. In 2014,

about two thirds of the world's population aged 60 years or older lived in the less developed regions, and by 2050 this proportion is projected to increase to about four fifths.

46. A number of countries in the more developed regions are already facing very low old-age support ratios. For example, Germany, Italy and Japan have only 2.5 to 3 working-age adults for each older person. At the other extreme, countries such as Bahrain, Qatar and the United Arab Emirates have more than 35 people of working age per older person, owing to their large migrant populations. European countries tend to cluster at the lower end of old-age support ratios, and Latin American and Caribbean countries fall mostly in the middle range, while countries from Western Asia, South-Central Asia and sub-Saharan Africa tend to have relatively high old-age support ratios.

47. The older population is itself ageing. The share of people aged 80 years or older (sometimes called the "oldest old") within the older population was 14 per cent in 2014, and is projected to reach 19 per cent in 2050. Thus, there could be 392 million people aged 80 years or older by 2050, or more than three times today's number.

48. In virtually all countries, the older population is predominantly female. Because women live longer than men, on average, older women outnumber older men almost everywhere. In 2014, globally, there were 85 men per 100 women in the 60 years or older age group and 61 men per 100 women in the 80 years or older age group. These gender ratios are projected to increase moderately during the next several decades, reflecting a slightly faster projected improvement in old-age mortality for men compared with women.

49. These demographic changes raise important concerns about the possible weakening of familial support systems and traditional arrangements for old-age security. As a result of the trend towards lower fertility, people will have potentially fewer sources of familial care and support available as they age. Globally, 40 per cent of people aged 60 years or older live independently (alone or with their spouse only). Independent living is far more common in the more developed regions, where about three quarters of older people live independently, compared with one quarter in the less developed regions and one eighth in the least developed countries. As populations continue to age, many countries will need to adapt their policies and the provision of services to meet the demands of a population with an increasing proportion of older people.

VIII. Urbanization and city growth

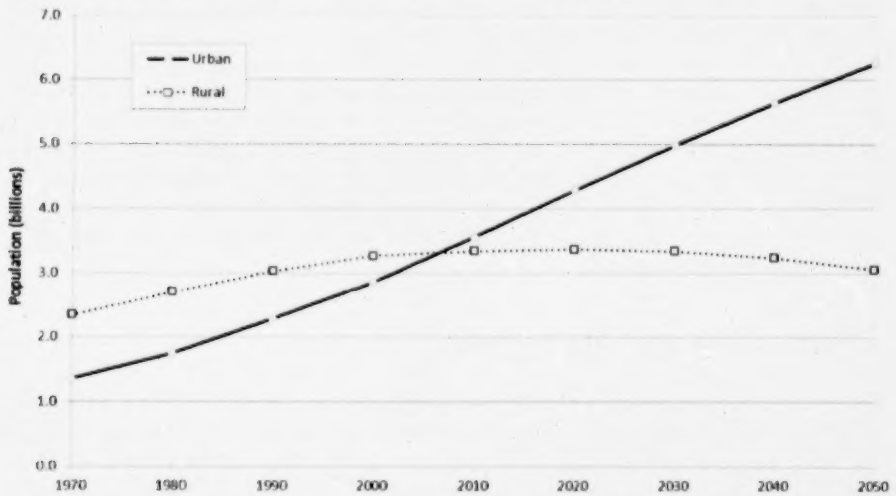
50. The world has passed a significant milestone since the 1994 Cairo Conference. More than half of the world's population now lives in urban areas (see figure XVI). The challenges associated with managing urban areas have increased in both scope and complexity. Urban growth, if well planned, has the potential to improve people's access to education, health care, housing and other services, expand opportunities for economic productivity and better manage the impact of people on the environment. At the same time, rapid urban growth presents challenges to sustainable urban planning and good governance, particularly when localities are not properly prepared for it.

51. The world's urban population increased from 2.3 billion in 1994 to 3.9 billion in 2014 and is projected to grow to 6.3 billion by 2050. By comparison, the size of the world's rural population remained basically unchanged between 1994 and 2014 and is projected to begin to contract, so that there could be 0.3 billion fewer rural inhabitants in 2050 than there are today.

52. There are marked differences in the level and speed of urbanization among major areas of the world and even greater variation between individual countries and individual cities. With three quarters of its population living in urban settlements in 2014, Latin America and the Caribbean is now predominantly an urban region, with levels of urbanization comparable to those of North America and many European countries. By contrast, Africa and Asia are considerably less urbanized, with 41 and 47 per cent of their respective populations living in urban areas; starting from lower levels, these two major areas are expected to have more rapid rates of urbanization between 2014 and 2050.

53. Megacities, defined as large urban agglomerations of 10 million inhabitants or more, have become both more numerous and considerably larger in size. Although megacities attract attention because of their size and economic significance, the proportion of people living in megacities is relatively small. In 2014, 10 per cent of the world's population resides in cities of 10 million inhabitants or more, and by 2025 that proportion is expected to increase to almost 14 per cent. By contrast, in 2014, 51 per cent of the world's population lived in urban settlements with fewer than 500,000 inhabitants; by 2025, that proportion is expected to fall to 43 per cent.

Figure XVI
Estimated world urban and rural populations, 1970-2050

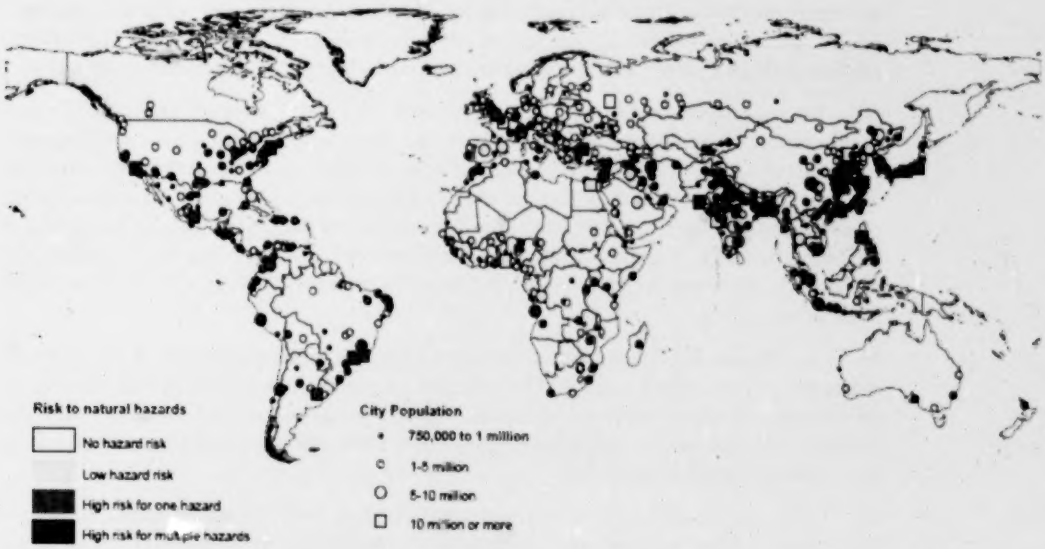


54. Tokyo is the most populous urban agglomeration in the world, with 37.2 million inhabitants, followed by Delhi, India (22.7 million), Mexico City and New York (both with 20.4 million), Shanghai, China (20.2 million), and Sao Paulo (19.9 million). In 2025, Tokyo is expected to remain the largest urban agglomeration, with 38.7 million inhabitants, followed by Delhi; Shanghai; Mumbai, India; Mexico City; New York;

Sao Paulo; Dhaka; Beijing; and Karachi, all of which are expected to have more than 20 million inhabitants.

55. In 2011, of the people living in urban areas with 1 million or more inhabitants, 60 per cent, or approximately 890 million people, were living in areas at high risk of exposure to at least one type of natural disaster, specifically, flooding, drought, cyclones or earthquakes.[9] Major cities in Africa and Europe are the least exposed to such risks. Only 37 and 26 per cent, respectively, of their large cities are located in areas at high risk of exposure to at least one form of natural disaster. However, cities in Latin America and the Caribbean, North America and, especially, Asia are often located in areas exposed to one or more natural hazards (see figure XVII). In these regions, between one half and two thirds of the cities with 1 million inhabitants or more are located in areas exposed to a high risk of at least one form of natural disaster.

Figure XVII
Distribution of cities by population size and risk of natural hazards, 2011



IX. Conclusions

56. Since the International Conference on Population and Development, held in Cairo in 1994, the world's population has grown from 5.7 to 7.2 billion, with three quarters of that growth occurring in Asia and Africa. Although population growth is slowing, projections by the United Nations suggest that the world's population will continue to increase and could reach 9.6 billion by mid-century.

57. From a demographic perspective, countries are more diverse today than at any previous point in history. At one end of the spectrum are countries that are still experiencing high fertility, resulting in youthful age structures and rapid population

[9] *World Urbanization Prospects: The 2011 Revision* (United Nations, 2012).

growth. At the other end are countries where fertility has fallen below replacement level, resulting in rapid population ageing and, in extreme cases, population decline.

58. Few countries have met the minimal benchmark of a 50 per cent reduction in unmet need for family planning, agreed upon in the 1999 key actions for the further implementation of the Programme of Action of the Conference. Thus, the provision of voluntary and high-quality family planning information, counselling and services merits further investment throughout the world.

59. Despite the progress that has been achieved in raising life expectancy over the past 20 years, most countries will fail to achieve by 2015 the life expectancy target of 75 years (70 years for the countries experiencing the highest mortality levels) set out in the Programme of Action. Only 35 per cent of countries with a life expectancy of between 60 and 75 years at the time of the Conference have surpassed 75 years in the period 2010-2015. Just one of the 53 countries with a life expectancy of less than 60 years at the time of the Conference has since surpassed 70 years. Similarly, the world will miss the Conference target of a 75 per cent reduction in maternal mortality. To accelerate progress, continued efforts are needed to improve health and survival at all stages of life, including in infancy and childhood, adolescence and youth, and the working and reproductive years, and at older ages.

60. International migration has increased in size, scope, complexity and demographic significance over the past 20 years. Since the Cairo Conference, international migratory flows have become increasingly diverse, and many countries are now simultaneously countries of origin, destination and transit. As a component of population change, net migration has become important for its role in mitigating a tendency towards population decline in some countries of the more developed regions. Positive net migration cannot, however, reverse the long-term trend towards population ageing.

61. An important consequence of observed and anticipated changes in fertility and mortality is population ageing. The number of young people has grown rapidly in recent decades but is expected to remain relatively stable over the next 35 years. By contrast, the number and proportion of older people are expected to continue rising well into the foreseeable future.

62. More than half of the world's population now lives in urban areas. Although the number of large urban agglomerations is increasing, approximately half of all urban dwellers live in smaller cities and towns. Future population growth is expected to be absorbed by urban areas. The task of managing urban areas has increased in both scope and complexity and has become one of the most important challenges of the twenty-first century.

63. In summary, the current demographic picture is one of considerable diversity and ongoing change, reflected in new patterns of childbearing, marriage, mortality, migration, urbanization and ageing. Consequently, the size, structure and spatial distribution of the world's population are expected to look quite different in the future from what they are today. Demographic change will continue to affect and be shaped by other equally important social, economic, environmental and political changes. Increased knowledge and understanding of how these factors interact can inform the international debate on the formulation of the post-2015 development agenda and the elaboration of policies to achieve both new and existing development goals.